

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

**REQUEST FOR PATENT FEE REFUND**

1 Date of Request: _____		2 Serial/Patent # <u>08839873</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
		<input checked="" type="checkbox"/> Filing			\$ <u>80.00</u>						
		<input type="checkbox"/> Amendment			\$						
		<input type="checkbox"/> Extension of Time			\$						
		<input type="checkbox"/> Notice of Appeal/Appeal			\$						
		<input type="checkbox"/> Petition			\$						
		<input type="checkbox"/> Issue			\$						
		<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$						
		<input type="checkbox"/> Maintenance			\$						
		<input type="checkbox"/> Assignment			\$						
<input checked="" type="checkbox"/> Other			\$								
		7 TOTAL AMOUNT OF REFUND		\$ <u>80.00</u>							
		8 TO BE REFUNDED BY:									
10 REASON:		Treasury Check									
<input checked="" type="checkbox"/> Overpayment		<input checked="" type="checkbox"/> Credit Deposit A/C #:									
<input type="checkbox"/> Duplicate Payment		9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"> <tr> <td>1</td><td>9</td><td>--</td><td>0</td><td>7</td><td>4</td><td>3</td> </tr> </table>			1	9	--	0	7	4	3
1	9	--	0	7	4	3					
<input type="checkbox"/> No Fee Due (Explanation):											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>ST Gaynor</u>			TITLE: <u>CLK</u>								
SIGNATURE: <u>[Signature]</u>			PHONE: _____								
OFFICE: <u>6W30</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>[Signature]</u>			DATE: <u>26 Feb 98</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance  
Refund Branch  
Crystal Park One, Room 802B**